CITY OF RIVERSIDE DATA CONTROL CLERK

NAME: SOCIAL SECURITY #	
PLEASE PRINT	
ndicate by circling the degree of experience you have in any of the following, using a	scale of 0-5, where
0 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 =	= 5+ years of experience.
	Years of Experience
Answering oral inquires or complaints	0 1 2 3 4 5
Answering busy telephones/multiple lines	0 1 2 3 4 5
Filing/Sorting/Alphabetizing	0 1 2 3 4 5
Working with confidential or sensitive material	0 1 2 3 4 5
Keyboarding complex or statistical material	0 1 2 3 4 5
Keyboarding routine material	0 1 2 3 4 5
Checking input and output data for accuracy	0 1 2 3 4 5
Proficiency in using word processing/database computer software programs Which programs are you proficient using? Please indicate experience with each.	
Microsoft Word	0 1 2 3 4 5
Microsoft Excel	0 1 2 3 4 5
Microsoft Access	0 1 2 3 4 5
Groupwise or similar email program	0 1 2 3 4 5
Other	0 1 2 3 4 5
Other	0 1 2 3 4 5
Corresponding in written form via letter, memo or email	0 1 2 3 4 5
Prioritizing multiple tasks and meeting multiple deadlines	0 1 2 3 4 5
Basic accounting functions including posting, checking, and balancing accounts	0 1 2 3 4 5
Maintaining ledger accounts	0 1 2 3 4 5
Producing reports based on financial, budget, narrative or statistical records	0 1 2 3 4 5
Proficiency in using work order management systems Which programs are you proficient using?	0 1 2 3 4 5
Maintaining time logs and assigning job numbers in relation to work order management	0 1 2 3 4 5
hereby certify that all statements made on this questionnaire are true and comp misstatement or omission of material facts may subject me to disqualification or dism	
Signature: Date:	